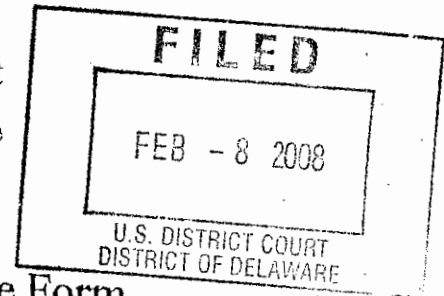


United States District Court  
For the District of Delaware



Acknowledgement of Service Form  
For Service By Return Receipt

Civil Action No. 05cv739 SLR  
scanned

Attached below is a return receipt card reflecting proof of service upon the named party on the date shown.

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roberta F. Burns, MD  
1724 Harness Place  
Brentwood, TN 37027

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt

☐ Insured Mail

☐ C.O.D.

☐ Merchandise

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 0710 0003 9056 7505